



DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	3801P106	
		First Named Inventor	David Ching Li	
		COMPLETE IF KNOWN		
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.18(e)) required)	Application Number	10/749,684
		Filing Date	December 31, 2003	
		Art Unit	3628	
		Examiner Name	Not Yet Assigned	

I, a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below, next to my name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND ARCHITECTURE FOR FACILITATING PAYMENT TO E-COMMERCE MERCHANTS
VIA A PAYMENT SERVICE - UTILITY**

(Title of the Invention)

The specification of which

☐ is attached hereto,

OR

☒ was filed on (if applicable):

or 12/31/2003 as United States Application Number 10/749,684
as PCT International Application Number _____

and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment specifically referred to above.

I do not know and do not believe that the claimed invention was ever known or used in the United States or America before my invention thereof, or patented or described in any printed publication in any country before my invention thereof or more than one year prior to this application. I do not know and do not believe that the claimed invention was in public use or on sale in the United States of America more than one year prior to this application, nor do I know or believe that the invention has been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months (for a utility patent application) or six months (for a design patent application) prior to this application.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, or inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s):

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Appointment of Practitioners:

I hereby appoint the practitioners associated with Customer Number: 08791 as my respective patent attorneys and patent agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected herewith.

If this patent application is assigned, then the undersigned hereby authorizes the patent attorneys and patent agents named herein to accept and follow instructions from the assignee(s) as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the patent attorneys and patent agents and the undersigned. In the event of a change in the persons from whom instructions may be taken, at least one patent attorney or patent agent named herein will be so notified by the undersigned.

Correspondence:

Direct all correspondence to Customer Number 08791.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: David Ching Li
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])
Inventor's Signature: [Signature] Date: 11/15/04
Residence: 536 Mill River Ln, San Jose, CA 95134 Citizenship: USA
(City, State, Country) (Country)
Mailing Address: 536 Mill River Ln, San Jose, CA 95134

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: David Young-June Kang
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature [Signature] Date 11/15/04
Residence 250 San Francisco, CA USA Citizenship USA
(City, State, Country) (Country)
Mailing Address 250 King St #914
San Francisco, CA 94107

NAME OF THIRD INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Benjamin Gregg Listwon
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
(City, State, Country) (Country)
Mailing Address _____

NAME OF FOURTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Max R. Levchin
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
(City, State, Country) (Country)
Mailing Address _____

NAME OF FIFTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
(City, State, Country) (Country)
Mailing Address _____

NAME OF SIXTH INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: _____
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)Mailing Address _____
_____NAME OF SEVENTH INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: _____
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)Mailing Address _____
_____NAME OF EIGHTH INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: _____
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)Mailing Address _____
_____NAME OF NINTH INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: _____
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)Mailing Address _____

NAME OF TENTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
(City, State, Country) (Country)
Mailing Address _____

NAME OF ELEVENTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
(City, State, Country) (Country)
Mailing Address _____

NAME OF TWELFTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
(City, State, Country) (Country)
Mailing Address _____

NAME OF THIRTEENTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
(First, Middle (if any), Family Name (or Surname), and Suffix (if any))
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
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		First Named Inventor	David Ching Li
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<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)		Application Number	10/749,684
		Filing Date	December 31, 2003
		Art Unit	3628
		Examiner Name	Not Yet Assigned

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(Title of the Invention)

the specification of which

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and was amended on _____ as PCT International Application Number _____ (if applicable)

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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
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NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: David Ching Li
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)

Mailing Address _____

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: David Young-Jane Kang
 (First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
 (City, State, Country) (Country)

Mailing Address _____

NAME OF THIRD INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Benjamin Gregg Listwon
 (First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature [Signature] Date 11/22/04

Residence Palo Alto, CA, USA Citizenship USA
 (City, State, Country) (Country)

Mailing Address 666 College Ave.
Palo Alto, CA 94306 USA

NAME OF FOURTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Max R. Levchin
 (First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
 (City, State, Country) (Country)

Mailing Address _____

NAME OF FIFTH INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
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Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
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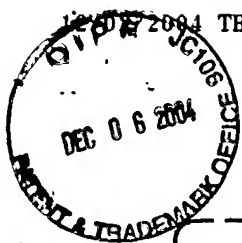
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		Application Number	10/749,684
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		Art. Unit	3628
		Examiner Name	Not Yet Assigned

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			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

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NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: David Ching Li
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)

Mailing Address _____

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NAME OF SECOND INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: David Young-Jane Kang
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)Mailing Address _____
_____NAME OF THIRD INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: Benjamin Gregg Listwon
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)Mailing Address _____
_____NAME OF FOURTH INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: Max R. Levchin
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])Inventor's Signature  Date 12/2/04Residence 165 Forest Ave #2C Citizenship US
(City, State, Country) (Country)Mailing Address Palo Alto CA 94301
_____NAME OF FIFTH INVENTOR: ☐ A petition has been filed for this undersigned inventorFull Name: _____
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) (Country)Mailing Address _____

NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this undersigned inventor

Full Name:

(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature

Date

Residence

Citizenship

*(City, State, Country)**(Country)*

Mailing Address

NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this undersigned inventor

Full Name:

(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature

Date

Residence

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Inventor's Signature

Date

Residence

Citizenship

*(City, State, Country)**(Country)*

Mailing Address

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NAME OF TENTH INVENTOR:

☐ A petition has been filed for this undersigned inventor

Full Name: _____

(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____

Date _____

Residence _____

(City, State, Country)

Citizenship _____

*(Country)*Mailing Address _____

NAME OF ELEVENTH INVENTOR:

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Full Name: _____

(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____

Date _____

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Full Name: _____

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Date _____

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Date _____

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